

<b>MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET</b> Substitute for Form PTO-1360 (For use with Form PTO/SB/06)				Application Number 10/596,940		Filing Date 29 June, 2006			<input type="checkbox"/> To be Mailed				
				Applicant(s) BASOL ET AL.						Page 1 of 1			
* May be used for additional claims or amendments													
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SEC. AMENDMENT		*			*		*	
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
1	X						51						
2		1					52						
3		1					53						
4		1					54						
5		1					55						
6		1					56						
7		1					57						
8		1					58						
9		1					59						
10		1					60						
11	X						61						
12		1					62						
13		1					63						
14		1					64						
15		1					65						
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48							98						
49							99						
50							100						
Total Indep	2						Total Indep						
Total Depend		18					Total Depend						
Total Claims		20					Total Claims						

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Part of Paper No20090227-1.